

**PATENT APPLICATION FEE DETERMINATION RECORD**  
Effective October 1, 2003

Application or Docket Number

10690300

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

TOTAL CLAIMS	37	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	37 minus 20 =	17
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

7.12.05

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	37	Minus 37	=
Independent	4	Minus 4	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

1/13, 18, 28

1/20/06

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	37	Minus 37	=
Independent	6	Minus 4	= 2
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	Column 1	Column 2	Column 3
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total		Minus	=
Independent		Minus	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3  
 \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  
 \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	385.00
XS 9=	153
X43=	43
+145=	—
TOTAL	581

RATE	FEE
BASIC FEE	770.00
XS18=	
X86=	
+290=	
TOTAL	

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

RATE	ADDI-TIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL	

RATE	ADDI-TIONAL FEE
XS18=	
X86=	
+290=	
TOTAL	

RATE	ADDI-TIONAL FEE
XS 9=	
X43=	200
+145=	
TOTAL	700.00

RATE	ADDI-TIONAL FEE
XS18=	
X86=	
+290=	
TOTAL	

RATE	ADDI-TIONAL FEE
XS 9=	
X43=	
+145=	
TOTAL	

RATE	ADDI-TIONAL FEE
XS18=	
X86=	
+290=	
TOTAL	

United States Patent and Trademark Office  
- Sales Receipt -

04/27/2006 EDANTZLE 00000001 502413 10690306

01 FC:2201 200.00 DA



04-21-06

ATF  
JFW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: Ward *et al.*

§ GROUP ART UNIT: 3672

SERIAL NO.: 10/690,306

§  
§

§ CONFIRMATION NO.: 8337

FILED: October 21, 2003

§  
§  
§

FOR: Well Screen Primary Tube  
Gravel Pack Method

§

EXAMINER: Matthew J. Smith

CERTIFICATE OF MAIL BY EXPRESS MAIL	
ED982572421US	April 20, 2006
Express Mail No.	Date of Deposit
I hereby certify that this paper or fee is being deposited with the United States Postal Service, "Express Mail Post Office to Addressee" service under 35 C.F.R. §1.10 on the date indicated above and is addressed to:	
MAIL STOP AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
By: Yvonne R. Simera	Date of Signature: 4-20-06

AMENDMENT B

MAIL STOP AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Date: April 20, 2006  
Docket No.: 10170-8

Sir:

In response to the Final Office Action dated October 20, 2005, and whatever extension of time is necessary to make this response timely for which Applicant petitions a three-month extension, said Petition which is attached, please amend the application as follows:

present invention have been mentioned, even though such differences do not appear in all of the claims. It is not intended by mentioning any such unclaimed distinctions to create any implied limitations in the claims. Not all of the distinctions between the prior art and applicant's present invention have been made by applicant. For the foregoing reasons, applicant reserves the right to submit additional evidence showing the distinction between applicant's invention to be unobvious in view of the prior art.

The foregoing remarks are intended to assist the Office in examining the application and in the course of explanation may employ shortened or more specific or variant descriptions of some of the claim language. Such descriptions are not intended to limit the scope of the claims; the actual claim language should be considered in each case. Furthermore, the remarks are not to be considered to be exhaustive of the facets of the invention which are rendered patentable, being only examples of certain advantageous features and differences which applicant's attorney chooses to mention at this time.

The Commissioner is to charge any deficiencies or overpayment to Deposit Account No. 50-2413 of Adams and Reese, LLP.

Please send all future correspondence regarding the above-referenced application to the undersigned at the address appearing below.

Reconsideration of the application as amended and allowance thereof are requested.

Respectfully submitted,



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David M. Ostfeld, Reg. No. 27,827  
Attorney for Applicant



**PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)**

**FY 2005**

*(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)*

Docket Number (Optional)

10170-8

Application Number 10/690,306

Filed October 21, 2003

For Well Screen Primary Tube Gravel Pack Method

Art Unit 3672

Examiner Matthew J. Smith

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$ <u>510.00</u>
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$ _____

☒ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2413. I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

04/24/2006 BABRAHA1 00000023 502413 10690306

I am the ☐ applicant/inventor.

02 FC:2253 510.00 DA

☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).

☒ attorney or agent of record. Registration Number 27,827

☐ attorney or agent under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34 \_\_\_\_\_

  
Signature

April 20, 2006

Date

David M. Ostfeld

Typed or printed name

(713) 308-0128

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.